

STATEMENT OF INTENT TO PARTICIPATE IN A STUDY ABROAD PROGRAM

Name: _____

Local Address: _____
Street City State Zip Code

Home Address: _____
Street City State Zip Code

Local (Cell) Telephone #: _____ Home Telephone #: _____ E-Mail: _____

Name of Program: _____

Sponsoring Campus: _____ Home Campus: _____

Term(s) Abroad Fall _____ Spring _____ Academic Year _____

Section I: SUNY Registration for the Program

Please initial the registration category that pertains to your status and sign at the bottom to indicate you understand the corresponding registration procedure.

Fredonia student on a Fredonia or other SUNY study abroad program:

My signature below authorizes the International Education Center to drop the classes for which I have registered and to register me for 15 INED credit hours in the program named above for the corresponding academic term. Registration at Fredonia is necessary to insure proper billing and to process state and federal financial aid. I understand that I must remain a full-time student at SUNY Fredonia and at the host university while abroad.

Fredonia student on non-SUNY program:

My signature below confirms that I understand I will not be registered at SUNY Fredonia for the duration of my study abroad program and that I must withdraw from SUNY Fredonia and apply for reinstatement/readmission to return to Fredonia.

Student from another SUNY campus on a Fredonia program:

My signature below confirms my participation on the above named Fredonia study abroad program. I understand I must be registered on my home SUNY campus for the program. It is my responsibility to contact advisors and officials at my home campus concerning study abroad policies.

Non-SUNY student on a Fredonia program:

My signature below confirms my participation on the above named Fredonia program. I understand I will be admitted to SUNY Fredonia as a visiting student and registered at Fredonia to insure proper billing and issuance of a transcript at the end of the program. It is my responsibility to contact advisors and officials at my home campus concerning study abroad policies.

Signature

Date